
CHAPTER 6. UNIT INSPECTION CHECKLISTS

6-1. ANNUAL GENERAL INSPECTION (AGI) - MEDICAL LOGISTICS

a. Commanders of ARNG medical units, medical activities, and medical elements of non-medical units who focus their efforts on the guidance provided in this chapter will be able to effectively manage medical logistics within their units. By devoting special attention to the three items listed below, you will be able to successfully prepare for the medical logistics portion of an AGI inspection.

- (1) Management of pharmaceuticals and injection devices.
- (2) Management of medical assemblages (sets).
- (3) Medical equipment maintenance.

b. The three checklists provided in this chapter permit medical units and medical elements of non-medical units to perform self-assessment/self-correction in these areas.

6-2. USE OF INSPECTION CHECKLISTS

a. NGB strongly recommends the use of the Checklist Tables found in this chapter.

b. The Checklists are identified as:

(1) Table 6-1. Inspection Checklist for Pharmaceuticals and Injection Devices (pages 6-3 through 6-5).

(2) Table 6-2. Inspection Checklist for Management of Medical Assemblages (pages 6-7 through 6-8).

(3) Table 6-3. Inspection Checklist for Medical Equipment Maintenance (pages 6-9 through 6-11).

TABLE 6-1. INSPECTION AND CHECKLIST FOR PHARMACEUTICALS AND INJECTION DEVICES

Units	TMC	Supply Support Activity	ITEM(S)
X	X		1. Unit-of-issue quantities of legend pharmaceuticals, to include controlled substances but not including topical preparations, are accounted for on DA Form 1296* or DA Form 3862** or computer generated equivalent form. (SB 8-75-S10)
X	X	X	2. Less than unit-of-issue quantities of controlled substances and legend pharmaceuticals (other than topical preparations) are accounted for on DA Form 3862. (SB 8-75-S10)
X	X		3. Prescription forms or DA Form 3161*** are available to support entries on DA Form 3862 for expenditures of controlled substances and other legend pharmaceuticals, less topical preparations. (SB 8-75-S10)
X	X		4. Prescription files (913-02) have been retained for two years by the unit or facility filling the prescription. (SB 8-75-S10)
X			5. Note "R" controlled substances are not on hand other than to support annual training. Turn-in of remaining stocks is accomplished within 30 days of the completion of AT. (SB 8-75-S10, Para 3-52 f). Civil Support Teams (CST) and CBRNE Enhanced Force Package (CERFP) are required to maintain year round based upon the CST approved formulary.
X	X		6. Note "R" controlled substances are stored in a locked vault at all times when personnel are not present in the area of the container. For small quantities, storage may be in an approved safe. (AR 190-51)
	X		7. Note "R" controlled substances are stored in a vault, safe, or GSA class 5 steel cabinet. If a safe or cabinet weighing less than 750 lbs is used, it will be attached to a permanent structure. (AR 40-61 and AR 190-51)
	X		8. Note "Q" controlled substances are stored in a safe, vault, locked cage, or secured room with access limited to selected individuals. (AR 40-61 and AR 190-51)
X			9. Aviation Survival Kits, complete with controlled substances, at unit level will normally be in the possession of personnel authorized kits for aviation operations and will be secured in the same manner as prescribed for other aviation life-support equipment, such as a locked room, cage, or individual locker. Controlled items must be in the survival kits at all times to ensure availability for use by crewmembers in the event of emergency survival (AR 40-61)

* DA Form 1296, Stock Accounting Record

** DA Form 3862, Controlled Substance Stock Record

*** DA Form 3161, Request for Issue or Turn-In

(continued) TABLE 6-1. INSPECTION CHECKLIST FOR
PHARMACEUTICALS AND INJECTION DEVICES

Units	TMC	Supply Support Activity	ITEM(S)
X	X		10. Note "Q" controlled substances and sensitive items are stored in a locked container that is locked at all times except during inventory, restocking, drug preparation, and injection operations or patient-care tasks, where a responsible medical facility staff member is physically present to control the custody and use of the protected items. (AR 190-51)
	X	X	11. Syringes and needles are stored in a container which is locked at all times except during inventory, restocking, drug preparation and injection operations, or patient-care operations where a responsible facility staff member is physically present to control custody and use of the protected items. (AR 190-51)
X	X	X	12. A quality control file is maintained for FSC 6505/08 items. (SB 8-75-S10)
X	X		13. Controlled substances in aviation survival kits will be inventoried every 120 days by the aviation life support equipment technician who conducts the periodic inspection of the complete kit and recorded on DA Form 1296 or a locally approved form. (AR 40-61)
X	X	X	14. An inventory of all Note R and Q controlled items, except components of aviation survival kits on hand in aviation units, will be conducted monthly. The inventory officer will authenticate the balance on stock accounting records at the storage locations for each line item inventoried. This will be done by a separate line entry on DA Form 1296, consisting of date, the abbreviation "INV", quantity on hand, and legible payroll signature. (AR 40-61)
X	X	X	15. All controlled substances inventories are performed by a disinterested officer, senior NCO, or civilian GS-7 or above designated by the commander. The same individual will not be assigned to inventory two consecutive months. (AR 40-61)
		X	16. Controlled substances are recorded on DA Form 1296 located at the storage site. (AR 40-61)
X			17. No controlled substances, potency- dated drugs, or items requiring refrigeration are on hand as components of medical assemblages. (They may be acquired to support field training but not to constitute components of a medical assemblage. (AR 40-61)
X	X	X	18. Unopened unit-of-issue packages of all items unlikely to be consumed before their expiration dates are turned in as directed by the USPFO to the supporting IMSA within 30 days following the conclusion of AT. (SB 8-75-S10)

(continued) TABLE 6-1. INSPECTION CHECKLIST FOR
PHARMACEUTICALS AND INJECTION DEVICES

Units	TMC	Supply Support Activity	ITEM(S)
X	X		19. All pharmaceuticals (FSC 6505 materiel) on-hand are listed on a formulary for the unit or activity. The State Surgeon has approved the formulary. (SB 8-75-S10)
			20. All issues of FSC 6505 materiel processed by USPFO or other Supply Support Activity (SSA) have been edited against unit formularies, which have been approved by the State Surgeon. Formularies are on hand in the stock control branch of the USPFO. (SB 8-75-S10)
X			21. DA Forms 1296 and 3862 on-hand in the unit reflect an inventory conducted during the last three days of the AT period. (SB 8-57-S10)
X			22. Within 60 days following the completion of AT, the unit forwards to the State Surgeon a copy of its formulary annotated with the quantities of items consumed during AT. (Inspector: Check for a file copy in the unit's files.) (SB 8-75-S10)
X	X	X	23. USAMMA DOD-MMQC messages are being received and a record of those messages is being maintained.
		X	24. Type I DOD-MMQC (quality control) messages have been expeditiously distributed to all State safety offices and all medical elements. (AR 40-61)
X			25. A log (may be electronic) of Type I DOD-MMQC messages reflecting Date Received, Message Number, NSN, Nomenclature, Action Required and Remarks, is maintained. (AR 40-61)
		X	26. All DOD-MMQC quality control messages are distributed to ARNG training sites operating troop medical clinics and DMSOs. (AR 40-61)
X	X	X	27. Stocks of suspended or unserviceable medical materiel have been physically segregated from serviceable stocks and identified as unserviceable or suspended stocks. (AR 40-61)
X	X	X	28. If the unit or activity has destroyed unserviceable medical materiel, there is on-hand the MIDI with a properly executed DA Form 3161 documenting the destruction. (SB 8-75-S10)

**TABLE 6-2. INSPECTION CHECKLIST FOR
MANAGEMENT OF MEDICAL ASSEMBLAGES**

Units	TMC	Supply Support Activity	ITEM(S)
X	X		1. A property book header page is prepared for each major medical assemblage.
X	X		a. Receipt, issue, and on-hand-balance postings will not be made to the header. On-hand quantities will be posted in pencil.
X	X		b. On the reverse side, the assembly order control number, if assigned,
			2. Pages listing components:
X	X		a. A separate property book page for each non-expendable component of the assemblage will follow the header page.
X	X		b. Each page will be annotated "Component of LIN _____" in the "authority" block.
X	X		3. Shortages of controlled substances will be accounted for on DA Form 2062*.
X	X		4. Medical assemblage components, including those with ARC of X or D (expendable or durable), have been inventoried at least once every 12 months. (AR 40-61)
X	X	X	5. Units using manual procedures will use DA Form 4998-R** for each expendable and durable item in the assemblage. This form is used to manage both quality control and informal accountability functions. (AR 40-61)
X	X	X	a. All entries on the Form except NSN, description, and unit of issue, should be in pencil.
X	X	X	b. Form should contain entries in at least "lot or batch number", "expiration date by lot or batch number", and "manufacturer and contract number" (if available), and columns, if any materiel is on hand.
			6. Division Medical Supply Officer (DMSO):
X			a. Maintains informal records for each item for which demands are expected using DA Form 1296. (AR 40-61)
X			b. Maintains DA Form 4998-R** for each shelf-life item for which demands are expected. (AR 40-61)
X	X		7. Shortages in medical assemblages (except controlled substances, shelf life, potency & dated and refrigerated items) are on requisition. (AR 40-61, Para 3 & 5-5)

*DA Form 2062, Hand Receipt/Annex Number

**DA Form 4998-R, Quality Control and Surveillance Record for TOE Medical Assemblage

(continued) TABLE 6-2. INSPECTION CHECKLIST FOR
MANAGEMENT OF MEDICAL ASSEMBLAGES

Units	TMC	Supply Support Activity	ITEM(S)
	X		8. Unit is using the most current component listing for inventory purposes.
			NOTE: The only acceptable component listings for multi-service (minor) medical assemblages are the DoD Medical Catalog, or a copy of a current NGB component listing. The only acceptable component listing for service-unique (major) medical assemblages is current NGB component listings and, Unit Assemblage (UA) listings issued by the USAMMA. If the NGB component listing or UA listing is older than one year, it is probably obsolete. (AR 40-61)
X			9. Unit is maintaining DA Form 2765*** (completed with the exception of document number, RIC, cost detail account number, price, project code and priority) for all controlled substances, shelf-life items, and Items requiring refrigeration which are short on on-hand sets. (FORSCOM Regulation 500-3-3,page 66 15 JUL 99) NOTE: Shelf-life items are those with an entry other than "O" in the SLC column of the AMDF.

*** DA Form 2765, Request for Issue or Turn-In

**TABLE 6-3. INSPECTION CHECKLIST FOR
MEDICAL EQUIPMENT MAINTENANCE**

Units	TMC	Supply Support Activity	Items
X	X		1. Organization has identified the medical equipment which requires periodic maintenance by reference to DA SB 8-75-S2/-S6/-S8 or the materiel fielding plan for the medical equipment set (SB 8-75-S10, para 3-4)
X	X		2. DA Form 2409 [*] is maintained on each item of medical equipment requiring periodic maintenance. (TB 38-750-2 and SB 8-75-S10, para 3-4)
X	X		3. DA Form 314 ^{**} is maintained for all items of medical equipment requiring maintenance. (TB 38-750-2, para 2-2)
X	X		4. Unit has on-hand or on request TB 38-750-2 and the TM or manufacturer literature for each item of medical equipment that requires periodic maintenance. (SB 8-75-S10, para 3-6)
X	X		5. The organization knows how to secure medical equipment maintenance support for required preventive maintenance services or repair beyond the Unit's organic capabilities. (SB 8-75-S10, para 3-2)
X	X		6. There is evidence the Unit Commander has monitored the Unit's medical equipment maintenance. (AR 40-61)
X	X		7. Unit medical equipment appears to be receiving operator maintenance (it is clean, operable, free of obvious defects, etc.).
X	X	X	8. Organization receives, registers and observes all sequentially numbered USAMMA, DOD-MMQC quality control messages. (AR 40-61)
X	X	X	9. The organization receives the SB 8-75 series from pinpoint distribution. (AR 40-61)
	X		10. State has published and distributed a medical equipment maintenance plan or SOP containing the following descriptive elements:
	X		a. How to determine which on-hand medical equipment requires periodic maintenance.
	X		b. How to obtain manufacturer literature on each type of medical equipment requiring periodic maintenance and not covered by a TM.
	X		c. A list of publications pertaining to medical equipment maintenance which should be on hand at Unit level.
	X		d. Specification of maintenance forms to be maintained at Unit level or of the publication that specifies those forms.
	X		e. Specification of a point-of-contact from which to request medical maintenance (preventive or repair) support beyond a unit's capability.
			f. Listing and prioritizing of sources of medical maintenance support available to units, OMSs and CSMSs.
	X		g. Specification of command responsibility or supervision of medical equipment maintenance.

^{*} DA Form 2409, Equipment Maintenance Log

^{**} DA Form 314, Preventive Maintenance Schedule and Record

(continued) TABLE 6-3. INSPECTION CHECKLIST FOR
MEDICAL EQUIPMENT MAINTENANCE

Units	TMC	Supply Support Activity	Items
X			h. Specification of procedures to ensure that medical equipment maintenance is monitored during formal and informal inspections and visitations to monitor surface maintenance.
X			i. Specification of a point of contact for medical equipment maintenance within the Surface Maintenance Manager's Office.
	X		11. Nonmedical maintenance inspectors visiting units with medical equipment. (AR 40-61)
X	X		a. Inspect medical maintenance records for completeness and notation of completion of required preventive maintenance.
X	X		b. Check the availability of technical manuals or manufacturer literature on medical equipment that requires periodic maintenance.
X	X		c. Evaluate the serviceability of a small quantity of medical equipment using TMs and manufacturer literature.
	X		d. Report results of their observations.
			12. Installed x-ray apparatus:
X	X		a. Has been serviced annually by a qualified medical equipment repairer (See Table 3-1)
X	X		b. Facilities have had a radiation protection survey within the past 3 years. (TB Med 521)
X	X		13. Audiometers are being calibrated annually . (AR 40-61) (TB 8-6515-001-35 para 2-1)
X	X		14. Audiometric booths have been tested for compliance with TB 750-8-2 when installed or when deterioration in the test environment is suspected. (AR 40-61)
X	X		15. Defibrillators have been performance tested semiannually. A DA Label 175* is affixed and a DA Form 5624-R** provides a record of the results of the evaluation. (AR 40-61)
X	X		16. There is evidence that electrical operated medical has been tested annually, and upon completion of any electrical repairs for current leakage and ground resistance, notified in accord with limits specified in NFPA Standards 99, Chapters 8 and 9. (AR 40-61)
X			17. D to D+60 units authorized MOS 91A medical equipment repairer, have on hand or on order, mandatory parts list repair parts to support equipment in their units and in subordinate units for which they have a doctrinal medical equipment maintenance support mission. (SB 8-75-S10, Para 3-13) (DA PAM 710-2-1)

*DA Form 175, Defibrillator Energy Output Certification

**DA 5624-R DC Defibrillator Inspection Record

(continued) TABLE 6-3. INSPECTION CHECKLIST FOR
MEDICAL EQUIPMENT MAINTENANCE

Units	TMC	Supply Support Activity	Items
X	X		18. DD Form 2163 ^{***} records the calibration/ verification/certification (CVC) services and is affixed to all equipment requiring CVC services. This includes all audiometers, centrifuges, defibrillators, electrocardiographs, anesthesia apparatus, thermoregulators, etc. (TB 38-750-2) (AR 40-61)
X	X		19. There is evidence that the Unit's medical maintenance TMDE is listed on the State's calibration program and that the Unit commander has appointed a Calibration Monitor. (SB 8-75-S10, para 3-3)
X	X		20. Ensure compliance of x-ray verification, certification and corrective action taken in conjunction with CVC of x-ray equipment by maintaining DD Form 2164 ^{****} with equipment maintenance log. (TB 38-750-2 para 2-13)

^{***} DD Form 2163, Medical Equipment Verification/Certification^{****} DD Form 2164, X-ray Verification/Certification Worksheet